### **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	on 2016	0113			Repor Filed I		CA	NDI	DATE		COM	AITTEE	<b>Y</b>	LUBE	1131	
Name of Filing C	ommittee, Candid	ate or L	obbyist:	j	FRIEND	S OF	BRIA	N KI	IRKLAN	ID	•					
Street Address:																
City:	CHESTER						State	e:	PA			Zip Co	de: 19	9016		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA		P	POST-	3.		AMENDN REPORT		Yes	No	<b>~</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		P	POST-	6.		TERMIN/ REPORT		Yes	No	<b>\</b>
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2018				NG MI					PAPER		$  \checkmark  $	DISKE	ГТЕ
Name of Office S	- Sought by Candida	te:					DAT	ΈΟ	F ELEC	СТІО	N	District Number	Office Code	Par	ty Code	County Code
							МО		DAY	YE	AR		•	DEM	1	
								11		6	2018		(SEE IN	STRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAR			МО		DAY	YI	EAR	FC	R OFFI	CE USE	ONLY	
Expenditures	from:		11 27	20	)18 <b>T</b>	О		12	(3)	31	2018					
A. Amount Bro	ught Forward Fron	n Last R	eport			\$				3,7	755.62					
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sched	dule I)	\$					0.00					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$				3,7	755.62					
D. Total Expend	ditures (From Scho	edule II	I)			\$				3,2	275.00					
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$				4	80.62					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	e II)	\$					0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)		\$					0.00			'		
					IDAVI											
I swear (or affirm)	that this report, incl	*	_						-		_		f my kno	wledge a	and belie	ef , true
correct and comple	cribed before me this										·:	of Perso	- C. hi	tina Dan		
-	day of		_ 20			_					ngnature	oi Peiso	ii Subiiii	tillig Kep		
	Signatu	re				_						Prin	ted Nam	е		
My Commission Ex	·					_		•				Ema	il			
	МО		AY	YR						ea Coc	le	Daytin	ne Telepi	none Nui	mber	
	a report of a cand				•											4000
No 320) as amende		iy knowi	eage and bei	ier this	political	comm	ittee i	ias n	ot violat	ed an	y provis	ions of th	e act or J	une 3,15	937 (P.L.	1333,
SWORN TO AND SUBSC	ribed before me this day of		20								s	ignature (	of Candid	ate		
						<u> </u>						Printe	ed Name			
My Commission Exp	Signature ires											Ema	il			<u> </u>
	мо	D	AY	YR		_			Area	Code		D	aytime T	elephon	e Numbe	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF BRIAN KIRKLAND	From:	11/27/20	<u>18</u> To:	12/31/2018
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	g Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Can	didate		Re	porting	Period			
			Fr	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committ	ee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL
0.00

### **PART B ALL OTHER CONTRIBUTIONS**

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

From: To:  DATE  Full Name of Contributor  MO DAY YEAR  Mailing Address City State  Zip Code (Plus 4)	DATE AMOUNT  MO DAY YEAR \$ 0.00	Name of Filing Commit	tee or Candidate		Report	ng F	Period			
Full Name of Contributor  MO DAY YEAR  Mailing Address  \$	MO DAY YEAR \$ 0.00 State Zip Code (Plus 4)				From:			To	o:	
Mailing Address \$	\$ 0.00 State Zip Code (Plus 4)						DATE			AMOUNT
	State Zip Code (Plus 4)	Full Name of Contributor			м	0	DAY	YEAR		
City State Zip Code (Plus 4)		Mailing Address							\$	0.00
	PAGE TOTAL	City	State	Zip Code (Plus 4)						

#### **PART C**

## **Contributions Received From Political Committees**

**OVER \$250.00** 

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting	Period				
			From:			То:		
				DA	TE		Þ	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR	\$	0.00
Mailing Address							7	0.00
City	State	Zip Cod	e (Plus 4)					
							•	PAGE TOTAL
Enter Grand Total of Part C on Schee	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

# ALL OTHER CONTRIBUTIONS

**OVER \$250.00** 

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Fror	n:		To	):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL 0.00

# OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee of	or Candidate		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							$\neg$	
City	State	Zip Code (I	Plus 4)					
Receipt Description	•	•			1	•	•	
Futor Coand Total of Bank	Cabadula I Detailed	Commence De	Caatle					PAGE TOTAL
Enter Grand Total of Part I	e on Schedule I, Detailed	Summary Page,	Section	4.			\$	0.00

#### **SCHEDULE II**

#### **IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS
DURING THE REPORTING PERIOD.
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Pe	riod	
FRIENDS OF BRIAN KIRKLAND	From:	<u>11/27/2018</u> <b>To</b> :	12/31/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	)R	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candidate			Reporting	g Period				
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	<b>-</b>	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Rep	orting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address				-					\$	0.00
City	State	;	Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.	<b></b>									0.00

3,275.00

## STATEMENT OF EXPENDITURES

Name of Filing Committee of	or Candidate		Reporti	ng Period			
FRIENDS OF BRIAN KIRKL	AND		From	11/2	7/2018	То:	12/31/2018
		I		DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
ISLAMIC CENTER OF CHEST	TER, INC						
Mailing Address			12	3	2018	\$	275.00
City CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19013	BANQU	ET TICKET:	S-ANNUA	L DINNER	
To Whom Paid			МО	DAY	YEAR		
CASH			1410	DA.	ILAK		
Mailing Address			12	18	2018	\$	3,000.00
City CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	ı	
	PA	19013	EXPEND	DITURES FO	OR SENIC	OR'S XMAS	LUNCHEON
							PAGE TOTAL
<b>Enter Grand Total of Exp</b>	enditures on Page 1, Re	port Cover Page, Item D	).				